

**ATTACHMENT F**  
**TIME SHEETS**

# KDHE TRUST FUND TIME SHEET LOG FOR FIELD ACTIVITIES

**SITE NAME:** \_\_\_\_\_  
**SITE ADDRESS:** \_\_\_\_\_  
**KDHE SITE CODE:** \_\_\_\_\_  
**CONSULTANT:** \_\_\_\_\_  
**PROJECT MANAGER:** \_\_\_\_\_

NOTE: This form is to be maintained during all field activities. All Workers must sign, date and list the time they arrive and depart from the site. This must be done each time a worker arrives or departs the site. A COPY OF THIS FORM MUST ACCOMPANY ALL REQUESTS FOR REIMBURSEMENT.

DATE	PRINT WORKERS NAME	WORKER'S SIGNATURE	JOB TITLE	TIME STARTED	TIME FINISHED	TOTAL TIME FOR DAY

I certify that the names and signatures above are those of the actual people who worked on the referenced site during the dates and times stated.

Signed: \_\_\_\_\_  
 Consultant Project Manager

Date: \_\_\_\_\_

I certify that the information on this sheet is true and accurate to the best of my knowledge.

Signed: \_\_\_\_\_  
 Owner/Operator or Authorized Representative

Date: \_\_\_\_\_

# **KDHE TRUST FUND TIME SHEET LOG FOR OFFICE ACTIVITIES**

**SITE NAME:** \_\_\_\_\_  
**SITE ADDRESS:** \_\_\_\_\_  
**KDHE SITE CODE:** \_\_\_\_\_  
**CONSULTANT:** \_\_\_\_\_  
**PROJECT MANAGER:** \_\_\_\_\_

NOTE: This form is to be maintained during all office activities. All Workers must sign, date and list the time they work on the site project. A separate form must be maintained for each site project. A COPY OF THIS FORM MUST ACCOMPANY ALL REQUESTS FOR REIMBURSEMENT.

DATE	PRINT WORKERS NAME	WORKER'S SIGNATURE	JOB TITLE	TIME STARTED	TIME FINISHED	TOTAL TIME FOR DAY

I certify that the names and signatures above are those of the actual people who worked on the referenced site during the dates and times stated.

Signed: \_\_\_\_\_  
 Consultant Project Manager

Date: \_\_\_\_\_